



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM  
DATAMASTER MAINTENANCE REPORT

**RECEIVED**

By Carol Day at 1:24 pm, May 04, 2015

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 days).  
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.  
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 201206	NAME OF AGENCY ST. JOSEPH POLICE DEPARTMENT	DATE OF INSPECTION 05-04-2015
LOCATION OF INSTRUMENT (STREET AND CITY) 501 FARAON ST. JOSEPH		TIME OF INSPECTION 05-04-2015 0735

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 05-04-2015 0735
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

☒ INDICATOR LIGHTS

☒ SIMULATOR SOLUTION SUPPLIER REPCO MARKETING LOT # 14001 EXRDATE 04-30-2016

☒ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD3330 EXP. DATE 11-17-2015

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE  
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE  
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 - .097	TEST 2 - .099	TEST 3 .100
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 1	(0-.04) 1	(.05-.09) 2	(.10-.14) 1	(.15-.09) 0	(OVER .19) 1
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS  
(USE OTHER SIDE IF NECESSARY).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME SCOTT GARY
TYPE II PERMIT NUMBER EXPIRATION DATE 240301 07-22-2015	TELEPHONE NUMBER 816-271-5359

RETURN COMPLETED REPORT TO THE:  
Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Blvd.  
Poplar Bluff, MO 63901

**CERTIFICATE OF ANALYSIS**

**MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.**

**LOT NUMBER: 14001**

**EXPIRATION DATE: April 30, 2016 at 11:59 p.m.**

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is May 1, 2014  
The expiration date for this lot number is April 30, 2016 at  
11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201206  
05/04/15  
07:35

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 49C

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHI  
JKLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnopqrstuvwxyz  
{|}~"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHI

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201206  
05/04/15

TESTING OFFICER:

GARY/SCOTT

OFFICER I.D.: 1013

PERMIT NUMBER: 240301

EXPIRATION DATE: 07/22/16

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	07:49
INTERNAL STANDARD	VERIFIED	07:49
EXTERNAL STANDARD	.097	07:49
BLANK TEST	.000	07:50
EXTERNAL STANDARD	.099	07:50
BLANK TEST	.000	07:51
EXTERNAL STANDARD	.100	07:51
BLANK TEST	.000	07:52

N = 3

SIM. = .1

AVG. = .0986

OPERATOR SIGNATURE

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD, OH 44901

OPERATOR SIGNATURE

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**

Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201206  
05/04/15

ARREST TIME: 07:00  
SUBJECT NAME:

K

DOB: 09/09/89 SEX: M

STATE/D.L.: MO/097531

ARRESTING OFFICER:

GARY/SCOTT

OFFICER I.D.: 1013

TESTING OFFICER:

GARY/SCOTT

OFFICER I.D.: 1013

PERMIT NUMBER: 240301

EXPIRATION DATE: 07/02/16

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	07:41
INTERNAL STANDARD	VERIFIED	07:41
RADIO INTERFERENCE		

OPERATOR SIGNATURE

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD, OH 44901



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

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**PERMIT**  
**TYPE II**  
**SCOTT GARY**

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**ALCO-SENSOR IV WITH PRINTER, DATAMASTER**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 7/22/2014

NUMBER 240301

EXPIRES 7/22/2016

MO 650-0771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (10-10)

